SEP 1 3 2010 W

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Application Number	10/537,749				
Filing Date	June 6, 2005				
First Named Inventor	Terry Wayne Lockridge				
Examiner Name	Junior O Mendoza				
Art Unit	2423				

Complete if Known

TOTAL AMOUNT OF PAYMENT Attorney Docket No. | PU020489 (\$) 1920.00 METHOD OF PAYMENT (check all that apply) ■ None Other (please identify): ☐ Check ☐ Credit card ☐ Money Order Customer Number 24498 Deposit Account: Deposit Account Number 07-0832 Deposit Account Name: THOMSON LICENSING LLC. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) □ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee □ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 200 100 100 50 130 65 Design Plant 200 100 300 150 160 80 500 250 600 300 300 150 Reissue Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) 25 Each claim over 20 (including Reissues) 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 180 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee Paid (\$) **Independent Claims** Fee (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) -100 =/ 50 = (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) 810.00 RCE Fee

SUBMITTED BY						
Name (Print/Type)	Vincent E. Duffy	Registration No. (Attorney/Agent)	39,964	Telephone	(818) 480-5319	
Signature	Vin	The			Date: 9/08/10	

SEP 1 3 2010 Applicant claims small entity status. See 37 CFR 1.27

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

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TOTAL AMOUNT C	PAYMEN	T (\$) 1920	.00	Attorney Docket No.	P0020489		
METHOD OF PAYMENT	(check all that a	pply)					
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□ Charge fe	e(s) indica	ted below		☐ Charge fee	e(s) indicated	below, excer	ot for the filing fe
🛛 Charge a	ny addition	al fee(s) or und	lerpayments	of 🛛 Credit any	overpaymen	ts	_
fee(s) under				_ ′	• •		
WARNING: Information information and author			olic. Credit card	information should no	t be included of	i this form. Prov	ide credit card
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FEE CALCULATION							
1. BASIC FILING, SE				DOU FEE	EVARAINI	ATION EEEC	
	FILING	Small Entity	SEA	RCH FEES Small Entity	EXAMIN	ATION FEES Small E	intity
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	. 0	0	0	
				•		-	
2. EXCESS CLAIM F	EES				_	Small	
Fee Description						e (\$)	Fee (\$)
Each claim over 20 (incl	-				50		25
Each independent claim	-	ing Reissues)			20 36		100 180
Multiple dependent claim Total Claims		xtra Claims	Fee (\$)	Fee Paid (\$)		⊍ ultiple Depend	
	or HP =	x cra oranno		=	_	e (\$)	Fee Paid (\$)
HP = highest number of					-	<u>- 111</u>	
Independent Claims		xtra Claims	Fee (\$)	_Fee Paid (\$)			
	or HP =	Atra Ciairiis	1.00 (4)	- ree Faid (\$)			
HP = highest number of		laims paid for, if gr	eater than 3.				
3. APPLICATION SIZ	76 666						
If the specification an		vreed 100 shee	ts of naner (ev	cluding electronically	filed sequence	or computer	
listings under 37 CFF	•			• ,	•		
sheets or fraction the					inty) for outling	autional co	
Total Sheets	Extra S	neets <u>Nu</u>	ımber of each	additional 50 or fra	ction thereof	Fee (\$)	Fee Paid (\$)
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							e. e. 146
4. OTHER FEE(S)							Fees Paid (\$
RCE Fee							810.00

1	SUBMITTED BY					
l	Name (Print/Type)	Vincent E. Duffy	Registration No. (Attorney/Agent)	39,964	Telephone	(818) 480-5319
l	Signature	Vin	7/1/			Date: 9/08/10

Appointment Atty/Agent Assignment & Record Correction Of Record Add.Payment of Fee Notif. of Foreign Ref. **Express Mail Application** TOTAL FEE AMT. Ext Time§ 1.136(a) Fee Trans.Form in OTHER Filing Fee Exp. RCE FRE Letter to PO Issue Fee duplic. Date Deposited: Label No .: Charge Dre 4 10/6/ 01/8/6 9/2/10 Mailed Fee Transmittal Sheet in duplicate Statement under CFR § 1.56-013M Check Items Mailed with Application Assignment & Recordation Sheet Preliminary Amendment Atty: Vincent E. Duffy Utility Application Transmittal IDS 1449 with References Missing Parts Letter Priority Document -Patent No. Terminal Disclaimer REQUESTS Cert. of Correction Suppl. Declaration Ext. Time§1.136(b) APPEALS Video Resell Notice of Appeals Pet. To Withdraw. OTHER Statement NASA Claim Disclaimer Status Letter Appeal Brief Declaration Reply Brief Declaration Serial No. 19/5.27, 749 Filed: 6/6/205 Towns Street Street Premium Channel And PPV Due US Provisional APPLICATION AS FILED Continuation CPA/RCE Original-US Nat1 Divisional Re-Exam Reissue Mailed Check Type Pg(s). of Formal Dwg(s) Letter to Exam/Draftsperson Reg. Priority 35USC119 references **AMENDMENTS** w/Drawing Correction(s) After Allowance U/R312 Statement under §1.56 Certificate of Mailing After Final Rejection OTHER Claims in Excess Specification Pgs Statement DOE Docket No Kuow 16-10 CKV, Uge et Inventor(s): TEPPy W. Lock V, Uge et Inventor(s): 1 and 545 Pm FOL Lic. To For. File Abstract Pages After Rejection Supplemental Independent Claim Pages Voluntary Sheets of Drawings IDS w/ Claims 2 Enter Number Charge Due Report to Data Base **Enter Date** 9/8/10 Mailed

